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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) GEORGE J JR J. KELLY Jr.								
	(b) Address (number and street) 239 W PEARL STREET	☐ Check if address changed		Candidate's FEC Identification Number     H0PA03271					
	(c) City, State, and ZIP Code					lew A	Amended		
	BUTLER	PA	1600		Statement (		A)		
4.	Party Affiliation	5. Office Sought			ict of Candidate				
	REPUBLICAN PARTY	House		PA	03				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)								
	NOTE: This designation should be f	iled with the appropriate office	listed in th	e instructions.					
	(a) Name of Committee (in full)  MIKE KELLY FOR CONGRESS								
	(b) Address (number and street) PO BOX 476								
	(c) City, State, and ZIP Code								
	LYNDORA			PA	16045				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)									
8.	8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
	NOTE: This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)  Team 2012								
	(b) Address (number and street) 217 Third Street, SE								
	(c) City, State, and ZIP Code								
	Washington			DC	20003				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Signature of Candidate Date									
GEORGE J JR J. KELLY Jr.			[Elect	ronically Filed]	05/28/2013				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
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FEC FORM 2 (REV. 02/2009)

## **FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC <b>Form 2</b> (Rev. 02/2003)		Page 2 /
DESIGN	NATION OF OTHER AUTHORIZED COMMITTEI (Including Joint Fundraising Representatives)	ES [ADDITIONAL]
I hereby authorize the following named committe candidacy.	e, which is NOT my principal campaign committee, to receive and exp	pend funds on behalf of my
NOTE:This designation should be filed	with the principal campaign committee.	
(a) Name of Committee (in full) GREAT EIGHT COMM	ITTEE	
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State and ZIP Code		
ALEXANDRIA	VA 22314	
DESIG	NATION OF OTHER AUTHORIZED COMMITTE (Including Joint Fundraising Representatives)	ES [ADDITIONAL]
I hereby authorize the following named committee candidacy.	ee, which is NOT my principal campaign committee, to receive and exp	pend funds on behalf of my
NOTE:This designation should be filed	with the principal campaign committee.	
(a) Name of Committee (in full)		
PA +5 Committee		
(b) Address (number and street)		
7315 Wisconsin Avenue Suite 310 East		
(c) City, State and ZIP Code		
Bethesda	MD 20815	
DESIG	NATION OF OTHER AUTHORIZED COMMITTE (Including Joint Fundraising Representatives)	ES [ADDITIONAL]
I hereby authorize the following named committee candidacy.	ee, which is NOT my principal campaign committee, to receive and exp	pend funds on behalf of my
NOTE:This designation should be filed	with the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		